<u>Chapter 7-000</u> Service Standards for Home and Community-Based Model Waiver Services for Children with Mental Retardation

7-001 Individual and Family Support Plan (IFSP): All waiver clients shall have an Individual and Family Support Plan (IFSP) developed at least annually. The plan shall be developed based on an assessment of the client and family in the community context and the community's role in supporting the client and family. This shall be a family-centered process, with the desired outcome being client and family empowerment. The IFSP shall be a flexible process capable of responding to changes in needs, desired outcomes, and services for the client and family. Meetings to develop the plan shall be held at a time, date, and location convenient to the client and family. Note: For state wards approved for the waiver, the DSS Child Welfare Worker shall have the decision-making authority of a guardian in all areas except education, where a surrogate parent is appointed, or unless otherwise specified in the court order.

<u>7-001.01 Team Composition</u>: The IFSP is developed by the client's team. The team process shall represent a collaborative approach, allowing the family to select team members to represent key individuals in the lives of the client and family.

<u>7-001.01A</u> Required Team Members: All individuals who serve on the team in a capacity that requires a license or certification in Nebraska shall meet the statutory requirements as set out in the uniform licensing law. The following team members must be present at and participate in the development of the IFSP:

- 1. The client, unless the client is unable or unwilling to attend. If the client does not attend the meeting, the IFSP shall document why the client did not attend and efforts to include the client at future IFSPs;
- 2. The client's parent(s) and/or legal guardian, if appropriate. Parental participation may not be necessary/appropriate if parental rights have been or are being terminated or if the young adult client (age 19 or over) does not wish to have parental involvement;
- 3. The case manager; and
- 4. Current direct providers of specialized services.

<u>7-001.01B Additional Team Members</u>: The following may participate in the development of the IFSP as needed:

- Service providers and proposed service providers;
- 2. Medical personnel;
- 3. Therapists;
- 4. Representatives of educational services;
- 5. Disability Services Specialist;
- Specialists;
- 7. Advocate:
- 8. Other family members: and
- 9. Others as appropriate.

<u>7-001.02</u> Service Identification: Services to be provided under the waiver must be based on an assessment of needs and goals of the client and the family. In the development of the IFSP, consideration shall be given to plans developed by other service and educational providers. The process shall rely on the client and family to make the final determination on services provided and the method in which they are provided. The IFSP shall include a review of assessments and identify:

- Further assessments needed and plan for obtaining them;
- 2. Needs and desired outcomes of the client and family;
 - a. Should needs in the following areas be identified for a client receiving outof-home habilitation and the team does not address them through formal programming, the IFSP must contain specific rationales for this:
 - (1) Self-help skills, e.g., eating, toileting, mobility/ambulation, and personal hygiene;
 - (2) Communication; and
 - (3) Behaviors.

Other identified needs that are not addressed through formal training must have a rationale for not addressing them, but it may be a more general statement.

- Services to be furnished to support/maintain the client in the family and/or community as well as support the family. This shall include waiver services to be provided by specialized providers and community providers, as well as non-waiver services;
 - a. For those clients receiving habilitation services, the team shall identify client and/or family-centered long term goals and short term objectives. These shall be stated in specific, observable, and measurable terms so that progress can be assessed;
- 4. The need for and plan to acquire medical services, including physical examination and immunizations. Consideration shall be given to the American Academy of Pediatrics periodicity schedule.
- 6. Frequency of services; and
- 7. Provider(s) of services.

<u>7-001.03</u> Units of Service: Once the team has reviewed the assessed strengths and needs and prioritized needs to be addressed, the team will identify the number of units of waiver services to be provided. (<u>Note</u>: While the number of units of waiver services may not total 24 per day, to be eligible for out-of-home waiver services clients must be assessed to require, and be provided with, full 24-hour services.)

<u>7-001.04 Service Provision</u>: Documentation supporting the provision of services shall be maintained by the provider. Documentation shall include:

- 1. Information indicating services provided, dates of service provision, and identification of provider;
- 2. Information indicating ongoing need for the service(s); and
- 3. For habilitation services, documentation of training provided and indications of progress and/or barriers to progress.

All providers shall implement the IFSP as written. Reimbursement for waiver services will not be authorized unless the services and the need for services have been identified and provided in accordance with the approved IFSP.

<u>7-001.05</u> Family Reunification: For minor clients (under age 19) in out-of-home placements, the IFSP must include a plan for family reunification unless parental rights have been or are being terminated. The IFSP for young adults in out-of-home placements must address efforts to support and enhance family involvement as appropriate. This plan shall be a written description of efforts of team members to support and enhance the client's involvement with the family. The plan shall specify:

- 1. Types of contacts/visits with the family;
- 2. Frequency of contacts/visits with the family; and
- 3. The team's plan for returning the client to the family home.

<u>7-001.06 IFSP Review</u>: The case manager shall complete a review of the IFSP with the client and family (as appropriate) at a minimum of every six months. Additional team members shall be included in the review as necessary/appropriate. The IFSP shall be revised and updated as necessary. Documentation of the review and any resulting changes in the IFSP shall be submitted to DPI. Upon review, DPI will forward to the Department.

7-002 Provider Standards: All settings and services provided under this waiver must be in compliance with all applicable local, state and federal laws and regulations as well as applicable licensure standards. To meet the following general provider standards, all providers shall -

- Provide services in a manner which demonstrates a philosophy of acceptance of, respect for, and a positive attitude toward people who are disabled and the philosophy of client and family empowerment;
- Protect the confidentiality of client and family information;
- Obtain adequate information on the medical and personal needs of each client:
- Be able to perform the tasks required for the client's and family's needs;
- Exhibit emotional stability in assuming responsibility, being aware of procedures to follow in case of an emergency, maintaining schedules, and adapting to new situations;
- Be free of communicable disease, have the physical capability to provide service, and be willing to provide a physician's verification statement, if requested by the Department;
- Provide waiver services in a safe and sanitary environment; and
- Observe and report all changes to the case manager.

Services provided under the waiver must be in accordance with the description of waiver services (see 480 NAC 6-002 ff).

7-002.01 Abuse and Neglect: Providers shall ensure that clients served shall be free from neglect or abuse.

7-002.01A Agency Providers: Each agency providing services shall certify that staff providing services have not been involved in a substantiated report of adult or child abuse/neglect and that staff have been checked for reports through the DSS Central Registries. Any staff with substantiated cases of adult or child abuse/neglect shall not provide services to waiver clients.

The agency provider shall have policies and procedures for handling cases of abuse or neglect of clients to ensure that disciplinary action is taken against those who have engaged in abuse or neglect. These policies and procedures must -

- Define abuse and neglect consistent with Nebraska law;
- 2. Describe the mechanism for reporting instances of abuse or neglect consistent with Nebraska law;
- Describe the mechanism for reviewing all allegations of abuse or neglect and document findings, actions taken;
- Describe the means by which due process is provided to the client and the staff in cases of alleged abuse or neglect.

7-002.01B Individual Providers: For all individuals providing homemaker services, respite care (as a non-specialized service), and habilitative day care, the Disability Services Specialist shall check the DSS Central Registries prior to entering into a provider agreement to verify that neither s/he nor any household members have been involved in a substantiated report of adult or child abuse/neglect. Any potential providers with substantiated cases of adult or child abuse/neglect shall not be authorized to provide services to waiver clients.

<u>7-002.02</u> Habilitation Provider Standards: Habilitation services will be provided by agencies certified to provide home and community-based waiver services. Family members shall not be Medicaid funded habilitation providers. Each provider offering habilitation services shall have an approved provider proposal (see 480 NAC 6-007.01) and written policies and procedures which address:

- 1. Agency governance and management;
- 2. Fiscal affairs;
- 3. Personnel practices:
- 4. Staff qualifications and responsibilities;
- 5. Staff training;
- 6. Service provision
 - a. Admission;
 - b. Team process;
 - c. Assessment;
 - d. Habilitation plan;
 - e. Behavior management;
 - f. Plan coordination;
 - g. Client records;
 - h. Discharge, transfer and follow-up; and
 - Client rights;
- 7. Environment
 - a. Physical environment;
 - b. Accessibility; and
 - c. Safety and sanitation.

These policies and procedures shall be implemented by the provider and made available for review by state and federal officials or other representatives.

7-002.02A Staff Qualifications: Staff providing habilitation services will meet applicable training and licensing requirements governed by state statute and regulations. This includes qualifications for professional and clinical staff positions as well as the supervisory and program instructor staff. Waiver provider policies and procedures shall address -

- 1. Written personnel policies:
- 2. Written job descriptions;
- 3. Assessment of good character with required review for any conviction or criminal record;
- 4. Educational credentials;
- 5. Valid driver's license (as applicable);
- Required policy and procedures on annual performance evaluation;
- Training on IFSP implementation for all staff providing client services;
- Training as applicable for food handling, medications, and first aid;
- 9. Required prior experience and related performance competencies;
- 10. Required knowledge of agency practices, goals and philosophy; and
- 11. Requirement for dismissal based on unprofessional or unethical conduct.

These policies and procedures shall be implemented by the provider and made available for review by state and federal officials or other representatives.

<u>7-002.03</u> Respite Care Provider Standards: Respite care services may be provided as a specialized service by agencies certified to provide home and community-based waiver services or as a non-specialized service. Respite care providers shall meet general waiver provider standards and the following criteria:

- 1. Respite providers must be age 19 or older;
- 2. Members of the client's immediate household may not be providers of respite care under this waiver;
- 3. If respite care is to be provided outside of the client's home, the provider must
 - a. Ensure that the facility or home is architecturally designed to accommodate the needs of the clients being served;
 - b. Have available an operable telephone;
 - c. Post emergency phone numbers by the telephone;
 - d. Ensure that the home/facility is accessible to the client, clean, in good repair, free from hazards, and free of rodents and insects;
 - e. Ensure that the facility or home is equipped to provide comfortable temperature and ventilation conditions;
 - f. Ensure that toilet facilities are clean and in working order;
 - g. Ensure that the eating areas and equipment are clean and in good repair;
 - h. Ensure that the home/facility is free from fire hazards;
 - i. Ensure that the furnace and water heater and any firearms, medications, and poisons are inaccessible to the client; and
 - Ensure that any household pets have all necessary vaccinations; and
- 4. In addition, should respite be provided as a specialized service, each agency provider of respite care shall
 - a. Employ respite care workers based upon their qualifications, experience, and demonstrated abilities;
 - Provide training to insure that respite workers are qualified to provide the necessary level of care. Agree to make training plans available to the Department; and
 - c. Assure adequate availability and quality of service.

7-002.04 Homemaker Provider Standards: Homemaker services will be provided by individuals approved by the Department or by an agency certified to provide home and community-based waiver services. Providers of homemaker services will meet all applicable Title XX standards under 473 NAC 5-001.08 and 5-011.07.

7-002.05 Environmental Modification Provider Standards: Environmental modifications will be performed by providers approved by the Department or by an agency certified to provide home and community-based waiver services. All services will be provided in accordance with applicable local and state building codes. All modifications must be made by or overseen by appropriately licensed/certified persons.

7-002.06 Habilitative Day Care Provider Standards: Habilitative Day Care services will be performed by providers approved by the Department or by an agency certified to provide home and community-based waiver services. These services may be provided in the client's family home or in a site approved, registered, or licensed by DSS and meeting the standards as specified in Nebraska Administrative Code Title 474.

7-002.07 Case Management Provider Standards: See 480 NAC 4-004.01.

<u>7-002.07A Case Management Services</u>: For waiver clients, the case manager must:

- 1. Conduct a face-to-face interview with the client and/or family as appropriate in order to determine needs and develop approaches to meet these needs.
- Along with a team that includes the client, client's family or legal representative, and others as appropriate, develop an IFSP which is documented in the case record.
- 3. Locate and coordinate service providers consistent with the client's IFSP.
- 4. Monitor service delivery on an ongoing basis with initiation of action as necessary, to ensure it is effective and consistent with the client's IFSP
- 5. Complete a review of the IFSP with the client and family (as appropriate) at a minimum of every six months. Additional team members shall be included in the review as necessary/appropriate.
- 6. Maintain documentation in a case record to supplement the IFSP which includes:
 - a. Information supporting goal selection;
 - b. Information supporting case management decisions and actions;
 - c. Documentation of communication with the client;
 - d. Documentation of referrals to resources;
 - e. Information supporting the selection of waiver services needed to maintain the client's placement with the family or in the community setting; and
 - f. Other factual information relevant to the case.
- 7. Make at least one monthly contact with documentation of case management services performed for the client. This documentation shall include
 - a. Reason for the contact;
 - b. Outcome of the contact; and
 - c. Further follow-up needed.